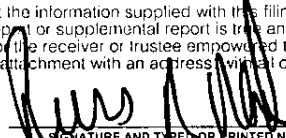


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90109 050 ***150.00

DOCUMENT # P02000124137 1. Entity Name WESTERN SUMMIT HOLDING, INC			
Principal Place of Business 8211 WEST BROWARD BLVD. SUITE 120 PLANTATION, FL 33324		Mailing Address 8211 WEST BROWARD BLVD. SUITE 120 PLANTATION, FL 33324	
2. Principal Place of Business - No P.O. Box # 201 N. University Drive Suite 103A Plantation FL 33324		3. Mailing Address 201 N. University Drive Suite 103A Plantation FL 33324	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent KHAN, ESHAUDDIN 8211 WEST BROWARD BLVD SUITE 120 PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name 201 N. University Drive (table) Suite 103A Plantation FL 33324 <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	201 N. University Drive <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MADIO, RALPH	NAME	Suite 103A
STREET ADDRESS	8211 WEST BROWARD BLVD, STE 120	STREET ADDRESS	Plantation FL 33324
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> Delete	TITLE	201 N. University Drive <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MADIO, RUSS	NAME	Suite 103A
STREET ADDRESS	8211 WEST BROWARD BLVD, STE 120	STREET ADDRESS	Plantation FL 33324
CITY-ST-ZIP	PLANTATION, FL 33324	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with or without other like empowered.			
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: 4/15/08 Daytime Phone #: 954-475-0201	